24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Senate Conservatives Fund	
	C C00448696
Check if X 24-hour report 48-hour report New report Amends report filed	I on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Alliance Strategies Group Inc.	06 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 7700 Congress Ave	Amount
Ste 3208	, milean
City State Zip Code	25981.75
Boca Raton FL 33487-1358	Transaction ID: E98EAEC5D36CE4E558ED Date of Disbursement or Obligation
Purpose of Expenditure IE-McDaniel-Email List Rental Category/ Type	06 10 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offic	e Sought: House District:
Christopher Brian Mcdaniel Oppose	President State: MS
Calendar Year-To-Date Per Election for Office Sought Disb 2014	ursement For: Primary General ✓ Other (specify) ► Primary Run-Off2014
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/	M M / D D / Y Y Y Y
Type	
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Disb	ursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	25981.75
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(a) TOTAL Index and art Fun and itures	
(c) TOTAL Independent Expenditures	25981.75
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Paul Vilagra	
	06 13 2014
Signature	